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Weekly Bulletin

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AUGUST 5, 1922

GUY P. JONES
EDITOR

Hospital Conference at Pasadena.

The second annual California hospital conference will be held in the Maryland Hotel, Pasadena, Tuesday to Saturday of the first week in September. Three other medical meetings will be held in the same place at the same time. The program is in course of preparation and a preliminary program will be published in the August number of the California State Journal of Medicine to be issued shortly. Public health workers of all classes are invited to attend this conference.



Dentists Work Hard at Public Health Center.

During the first six months of the present year the dental work of the Public Health Center of Alameda County covered a total of 7862 sittings. Of this number there were 5932 school children represented. Three full-time dentists, four half-time dentists and one dental hygienist operating in the Public Health Center, the school health centers and the Detention Home accomplished this large volume of work. Many of the undernourished and underweight children have gained considerably after having had their teeth properly cared for. These figures cover only those children who can not afford to pay a regular dental fee and who would have been obliged to do without this necessary dental care had it not been for the useful service that Alameda County is providing.

Simple Method to Revive Drowning Persons.

Most drownings in the United States occur between July 15 and September 1 of each year. It is during this period that the vacation season is at its height. If every swimmer knew about the simple prone pressure method of resuscitation and were to put it into use immediately, whenever necessary, many lives could be saved each year. Pulmotors are useful for resuscitating drowning persons, but they are by no means necessary and when needed they are generally located miles away from the scene of an accident. If a pulmotor is available, however, it should be sent for immediately and the prone pressure method should be used until the instrument arrives.

This method has been endorsed by the United States Army, the American Red Cross, the National Safety Council, the Boy Scouts and many other organizations engaged in welfare work. It can be used also for stimulating artificial respiration after suffocation from gas, shock from electricity and similar accidents. If, after the method has been applied for a period of an hour or two, the victim does not show signs of natural breathing, the work should not be discontinued. Many persons have been revived by the prone pressure method after four or five hours of continued application of the treatment. The following description of the method should be made readily avail-

able in all places in California where large numbers of persons are spending their vacations near swimming places:

Prone Pressure Method.

First, examine the victim's mouth and throat with your finger and remove any foreign body (tobacco, false teeth, etc.) Do not stop to loosen person's clothing, but immediately begin actual resuscitation. Every moment of delay is serious. Proceed as follows:

Lay the patient on his stomach, both arms extended overhead. Turn face to one side so that nose and mouth are free for breathing. Kneel, straddling the patient's hip bones; place the palms of your hands (fingers together) on the small of the back, little finger just touching the last rib—tips of fingers just out of your sight. On counting one, two, with the arms held straight, swing forward slowly so that the weight of your body is gradually but not violently brought to bear upon the patient. This action takes from two to three seconds.

The Swing Motion.

While counting three, immediately swing backward so as to remove the pressure, returning to the upright position. Hands should not be removed from patient while removing pressure. While counting four and five, rest. Repeat deliberately twelve to fifteen times a minute, the swinging forward and back—complete respiration in four or five seconds. Time by your own breathing.

As soon as this artificial respiration has been started, and while it is being continued, an assistant, if one is present, should loosen any tight clothing about the patient's neck, chest, or waist. Keep the patient warm by covering the limbs with blankets or by rubbing them gently. Continue respiration (if necessary, four hours or longer) without interruption, until natural breathing is restored or until a physician declares rigor mortis (stiffening of the body) has set in. If natural breathing stops after being restored, use resuscitation again.

Keep Patient Warm.

Do not give any liquid by mouth until the patient is fully conscious. Place ammonia near the nose, determining a safe distance by first trying how near it may be held to your own. Assistant should hit patient's shoe heels a few times with a stick and repeat this operation every

Weekly Radio Talks

POISONING FROM CAMPFIRE SMOKE.

Poison oak is one of the things besides flies and mosquitoes that takes the joy out of life in the open. Campers, particularly those who are susceptible to poison oak, should be careful to keep away from the smoke of camp fires if any leaves or branches of the poison oak shrub are in the fire. The sap from this plant may be carried in the smoke and deposited on the skin, causing as great irritation as if there had been direct contact with the growing plant. This poisonous sap may be also transferred by clothing, tools and insects that may have come into contact with the plant. Soap and hot water or alcohol should be applied immediately after contact with poison oak. The application must be prompt and thorough or it will only spread the irritating poison. This treatment may be followed later by gently rubbing talcum powder on the irritated skin.

five minutes until breathing commences. Give the patient fresh air but keep him warm. When patient revives, keep him lying down and do not raise him. Carry on resuscitation at closest possible point to the accident. Do not move patient until he is breathing normally, without assistance. If absolutely necessary to move, he should be placed on a hard surface, such as a door or floor of conveyance. Do not stop and interrupt resuscitation for an instant.

If alone with the victim, do not neglect immediate and continued resuscitation in order to call a doctor; start at once; the first few minutes are valuable. If other persons are present, send one of them for a doctor without a moment's delay.



"A man may live for years with an abscessed tooth and be unaware of the fact. Yet all the time the poison from this infection creeps slowly through his body, ever gravitating toward the weak spot. Apparently unimpaired, he goes his way until one day the weakened, damaged organ abruptly ceases to function and another untimely death is dedicated to ignorance."—Life Extension Institute.



Most flies are born and bred in stable refuse. Horses produce stable refuse. Hence, horses are largely responsible for flies. Score one for the automobile. Garages don't breed flies; stables turn them out in countless millions.

Stockton Wages War on Diphtheria.

The Stockton City Health Department, shortly before the close of the school year, started a campaign for the purpose of securing, before school opens again, the immunization against diphtheria of as many school children as possible. A circular letter to parents and guardians of school children in explanation of the Schick test and toxin anti-toxin administration was sent out early in June, together with cards upon which parents were asked to consent to the application of the test and immunization and to signify if they desired to have this done by the health department or by private physician. Of 6500 such cards sent to the parents or guardians of children attending public, private and parochial grammar schools, 4700 were returned by the middle of June. Of these, 1800 cards signified that the Schick test and immunization were desired; 1200 of the parents stated that they wanted the city health department to do the work and 600 desired to have the matter referred to the family physician. Following is the letter sent to the parents of Stockton school children and because of its simple, clear language it is believed that it may be useful to other local health departments.

HEALTH DEPARTMENT, CITY OF STOCKTON.

To the Parents or Guardian of a Stockton School Child:

Children who attend the schools are guarded as carefully as possible, by school nurses and teachers, from disease. Nevertheless, they come so closely in contact with one another that they are likely to carry infectious diseases and transmit them to one another.

In the City of Stockton diphtheria attacked over two hundred and fifty children and caused the death of fifteen last year.

We are now reasonably certain that we know how to protect your child against this disease if you will help.

By injecting one drop of a test solution under the skin of the child we can tell within two or three days whether your child is naturally protected against diphtheria or readily capable of catching the disease. If the child is safe nothing more need be done.

If it is not safe we can make it so by three harmless injections given at intervals of a week. The child will then probably be protected for life. The test is simple, free from all danger, and will not make your child sick. It is safe to apply, no matter how young the child is. By this method diphtheria among children can be practically wiped out.

Don't wait if you want your child protected instead of blindly trusting to luck. Let your family doctor apply the test at once and give you a certificate showing that your child has been tested and stating whether or not it is safe from diphtheria. If it is not safe let your family doctor give the three injections that will practically guarantee protection.

If you do not desire to obtain the services of a private physician, a Health Department Physician will apply the test and remedy free of charge.

The Health Department is your department and desires to obtain a record of your wishes in carrying on this fight to wipe out diphtheria.

Make out the enclosed card and have your child return it to his teacher as soon as possible.

Very truly yours.

CITY HEALTH DEPARTMENT,

By N. Sinai, Health Officer.

Board of Health: Dr. Dewy Powell, President; Dr. H. C. Peterson, Vice President; Dr. J. V. Craviotto, Dr. Wm. P. J. Lynch, Dr. Nathan Powell Barbour; Dr. H. S. Chapman, Executive Secretary.



To Form New Mosquito Abatement District.

Petitions are being circulated among the voters of Visalia and those residing within a radius of half a mile from the city limits asking the board of supervisors to sanction the formation of the Delta Mosquito Abatement District, as provided in the state law. It is required that the petitions shall contain names to the number of 10 per cent of the votes cast at the last general election. It is apparent that this number of names can be obtained without difficulty and that the formation of the district will proceed rapidly.



Insist Upon Clean Drinking Cups.

At this season of the year the soft drink business is at its maximum. Although it is illegal "to provide or expose for common use or permit to be so provided or exposed, or to allow to be used in common any cup, glass, or other receptacle used for drinking purposes," many individuals apparently do not know of this law. This law applies to hotels, restaurants, saloons, soda fountains, stores, theaters, public halls, public or private schools, churches, hospitals, clubs, office buildings, parks, playgrounds, lavatories or wash rooms, barber shops, railroad trains, boats, or any other public place, building, room, or conveyance. This law was not made without good reason. It is not only possible, but also very probable that diseases such as syphilis, tuberculosis, diphtheria, scarlet fever, measles, mumps, influenza, common colds, and other diseases are frequently conveyed from mouth to mouth through the use of common drinking utensils. It is the duty of every individual who may discover a common drinking utensil, to report the matter immediately to the local health officer within whose territory this violation of the law may be found.

MORBIDITY.**Smallpox.**

Only 12 cases of smallpox were reported last week. They are distributed as follows: Chino 1, Livermore 1, Los Angeles County 1, San Francisco 2, San Joaquin County 3, San Jose 4.

Typhoid Fever.

Twenty-four cases of typhoid were reported last week from the following localities: Fresno County 1, Fresno 1, Long Beach 1, Los Angeles County 1, Los Angeles 1, Nevada County 1, Orange County 1, Sacramento County 1, Sacramento 3, San Bernardino County 2, San Francisco 3, San Joaquin County 1, Stockton 5, Tehama County 1, Ventura County 1.

Cerebrospinal Meningitis.

Two cases of epidemic cerebrospinal meningitis were reported last week, San Francisco and San Joaquin County each reporting one.

Poliomyelitis.

San Joaquin County reported one case of poliomyelitis last week.

Epidemic Encephalitis.

Two cases of epidemic encephalitis were reported last week, one each from Fresno County and Los Angeles.

Rabies.

Venice reported one case of human rabies last week, in a child six years of age.

LIST OF DISEASES REPORTABLE BY LAW.

ANTHRAX	MEASLES
BERI-BERI	MUMPS
BOTULISM	OPHTHALMIA NEONATORUM
CEREBROSPINAL MENINGITIS (Epidemic)	PARATYPHOID FEVER
CHICKENPOX	PELLAGRA
CHOLERA, ASIATIC	PLAGUE
DENGUE	PNEUMONIA
DIPHTHERIA	POLIOMYELITIS
DYSENTERY	RABIES
ENCEPHALITIS (Epidemic)	ROCKY MOUNTAIN SPOTTED (or Tick) FEVER
ERYSIPELAS	SCARLET FEVER
FLUKES	SMALLPOX
FOOD POISONING	SYPHILIS*
GERMAN MEASLES	TETANUS
GLANDERS	TRACHOMA
GONOCOCCUS INFECTION*	TUBERCULOSIS
HOOKWORM	TYPHOID FEVER
INFLUENZA	TYPHUS FEVER
JAUNDICE, INFECTIOUS	WHOOPING COUGH
LEPROSY	YELLOW FEVER
MALARIA	

*Reported by office number. Name and address not required.

QUARANTINABLE DISEASES.

CEREBROSPINAL MENINGITIS (Epidemic)	POLIOMYELITIS
CHOLERA, ASIATIC	SCARLET FEVER
DIPHTHERIA	SMALLPOX
ENCEPHALITIS (Epidemic)	TYPHOID FEVER
LEPROSY	TYPHUS FEVER
PLAGUE	YELLOW FEVER

Section 16. Public Health Act. All physicians, nurses, clergymen, attendants, owners, proprietors, managers, employees, and persons living in or visiting any sick person in any hotel, lodging house, house, building, office, structure, or other place where any person shall be ill of any infectious, contagious, or communicable disease, shall promptly report such fact to the county, city and county, city, or other local health board or health officer, together with the name of the person, if known, and place where such person is confined, and nature of the disease, if known.

COMMUNICABLE DISEASE REPORT.

Disease	1922				1921			
	Week ending			Reports for week ending July 29 received by Aug. 1	Week ending			Reports for week ending July 30 received by Aug. 3
	July 8	July 15	July 22		July 9	July 16	July 23	
Anthrax	0	0	0	0	0	0	0	0
Cerebrospinal Meningitis	2	0	2	2	5	4	4	0
Chickenpox	56	49	42	18	59	70	30	23
Diphtheria	99	112	91	106	99	114	83	99
Dysentery (Bacillary)	6	0	1	2	1	4	3	1
Epidemic Encephalitis	4	1	2	2	1	5	5	1
Gonorrhoea	106	87	87	56	75	85	119	75
Influenza	5	12	6	4	5	16	3	5
Leprosy	1	1	2	0	1	0	1	0
Malaria	2	7	4	7	3	5	12	3
Measles	13	15	13	4	99	101	38	32
Mumps	19	29	10	2	37	52	32	32
Plague	0	0	0	0	0	0	0	0
Pneumonia	85	52	29	57	41	87	25	32
Poliomyelitis	0	2	1	1	3	3	6	11
Rabies	1	0	0	1	0	0	0	0
Scarlet Fever	43	44	35	35	52	51	44	43
Smallpox	38	26	14	12	59	54	28	43
Syphilis	80	109	97	108	68	50	70	121
Tuberculosis	234	160	130	176	112	150	146	184
Typhoid Fever	30	36	34	24	24	28	16	34
Whooping Cough	120	87	61	53	53	74	34	34
	944	829	661	670	797	953	699	773